

2004 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000052312

FILED
Oct 13, 2004
Secretary of State

Entity Name: R.A.S. LLC

Current Principal Place of Business:

4580 COLLEEN ST.
PORT CHARLOTTE, FL 33952 US

New Principal Place of Business:

48 CHERRY HILL RD.
CARMEL, NY 10512 US

Current Mailing Address:

4580 COLLEEN ST.
PORT CHARLOTTE, FL 33952 US

New Mailing Address:

48 CHERRY HILL RD.
CARMEL, NY 10512 US

FEI Number: 52-2436906 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SORKIN, JAMES
4580 COLLEEN ST.
PORT CHARLOTTE, FL 33952 US

Name and Address of New Registered Agent:

ABRAMS, ADAM C
2440 N.E. 197 ST.
MIAMI, FL 33180 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ADAM C. ABRAMS

10/13/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: CASSETTA, ANTHONY
Address: 48 CHERRY HILL RD.
City-St-Zip: CARMEL, NY 10512 US

Title: MGR (X) Delete
Name: SORKIN, JAMES
Address: 4580 COLLEEN ST.
City-St-Zip: PORT CHARLOTTE, FL 33952 US

Title: MGR () Delete
Name: OWENS, STEPHAN F
Address: 1951 TAVERN RD.
City-St-Zip: ALPINE, CA 91901 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CASSETTA, ANTHONY
Address: 48 CHERRY HILL RD.
City-St-Zip: CARMEL, NY 10512 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: OWENS, STEPHAN F
Address: 1951 TAVERN RD.
City-St-Zip: ALPINE, CA 91901 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ANTHONY CASSETTA

MGRM

10/13/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date